2002

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Older Homeless Women: Beneath the Safety Net

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Educational Objectives

1. Discuss how there is no stereotypical experience of, or explanation for, homelessness among older women.
2. Discuss why it is important to study the experiences of older homeless women.
3. Discuss policy and practice recommendations and specific ways to bridge efforts of aging and homeless service providers.

Case Study

Mrs. Smith is a 60-year-old widow who moved in with her unemployed daughter, Rosie, after her husband died five years ago. Mrs. Smith never worked and now depends on her husband's Social Security check as her sole source of income. Mrs. Smith had ongoing arguments with Rosie about the use of the Social Security check. Rosie insisted that the check be used to cover the rent, utilities and food. Mrs. Smith did not object to paying her share, yet argued that she needed money to pay for her prescriptions for diabetes, high blood pressure, osteoarthritis, and depression. Rosie took possession of the check each month by forcing Mrs. Smith to sign it over. Mrs. Smith never knew exactly where the money went but often went hungry and without her daily medications. Arguments over the fate of the check grew heated. Several times, Rosie locked Mrs. Smith out of the house overnight forcing Mrs. Smith to sleep in a car or at the church.

Mrs. Smith has now been homeless for four weeks. Her dilemma was first reported to Adult Protective Services (APS) by the Sheriff's Dept. when Mrs. Smith and Rosie were evicted for nonpayment of rent. At that time, Mrs. Smith refused APS services, stating that she could stay with her sister. However, her sister's husband allowed Mrs. Smith to stay only a few days before throwing her out. Mrs. Smith currently rents a room at the Sunrise Motel. The motel owner called APS after he approached Mrs. Smith about the unpaid bill and found her disheveled and distraught.
The Problem

The older homeless have been termed "America's untouchables" (Doolin, 1985). Women are largely invisible, with the exception of the rare "shopping bag lady" sheltering in the doorway of an office building. In spite of being an inaccurate generalization, this prominent conceptualization endures. In reality, a growing number of older women from a variety of backgrounds, identified as a category of the "new" homeless (Kutza & Keigher, 1991), are vulnerable. The case of Mrs. Smith illustrates just how a combination of situational factors such as victimization, lack of social supports, and low-income can quickly render someone homeless.

Older women are generally more vulnerable to economic and social displacement than are men. Three-fourths of all older persons who live below the poverty line are women; and, like Mrs. Smith, most are dependent upon Social Security (Administration on Aging, 1999). Low-income households headed by older women also have a one in three chance of having "worst case housing needs" (U.S. Dept. of Housing and Urban Development, 1998) and the majority of single older female renters spend more than 30% of their income on housing (National Coalition for the Homeless, 1999). Older women are also likely to have different encounters with the service system than do older men. Without the anchor of Veterans Administration services, many women face a fragmented service system where the social safety net does not exist. Those in particular danger of falling beneath the safety net are women between the ages of 50 and 62 who are ineligible for the major entitlement programs. Receiving services is unpredictable because neither aging services nor homeless programs are designed with these women in mind. In Virginia, adult protective services (APS) consider the homeless to be at risk of abuse, neglect, and exploitation, and often help women who would otherwise fall through the cracks.

The Virginia Study

A descriptive study was undertaken to develop a profile of older homeless women in order more accurately to determine their service needs. The construct "older homeless women" was defined as women 50 and older who require emergency or temporary shelter. Existing case records (N=223) were examined for the period 1996-1999 for adult protective services (APS) and selected homeless agencies in Richmond, Virginia Beach, Charlottesville, and counties surrounding Richmond.

An original coding instrument was designed to capture demographic and service-use variables. Content was modeled on existing forms agencies use for their own case recording, and pilot-tested prior to formal data collection. To collect the actual data, staff members at each agency identified closed case records for review that met criteria for inclusion in the study. A coding instrument was completed for each case record; the data were then tabulated and statistically analyzed using the Statistical Package for Social Sciences (SPSS).

The majority of women in the sample were either African American or Caucasian; the mean age was 60 years. Most were without a spouse or never married, and at or below the poverty line. Prior to becoming homeless, most of these women were either renting or "doubled-up" with family members or friends with no consistent night-time residence. A third of the women reported that insufficient income contributed directly to their homelessness. And, fully three-quarters of the sample experienced
intimate relationship problems to the extent that homelessness resulted. These problems ranged from family disputes to spousal violence and elder abuse. Women also tended to be homeless for a short period of time (three months or less) before reaching service providers. At that point they were in dire situations with immediate need for food and emergency housing. The majority of women received these services on a short-term basis, but only a small minority received desperately needed transitional housing and support services.

**Recommendations for Policy and Practice**

The study revealed that there are few specialized community services for the older homeless. Moreover, the existing social services system that encounters older homeless women may not be maximizing their capacity as sentinel agencies. Recommended actions include:

- Support development of additional multi-service options for temporary shelter (beyond private homes and motels) for persons with functional impairments with needs beyond meals and shelter.

- Place a stronger focus upon securing transitional housing and relocation services that include a component of supportive services.

- Create a better link with medical and psychiatric hospitals to improve discharge planning for older women vulnerable to homelessness.

- Secure appropriate referrals for treatment of mental health and substance abuse problems that differentiate from dementia. Screen for such problems, and refer appropriately. If such services are not available, advocate for improved community mental health services for older persons.

- Develop services for older homeless persons based on a "dual perspective" that addresses both problems of aging and the situational issues of homelessness.

Services also currently focus on crisis intervention, instead of on strategies to "close the door" on homelessness. Recommended actions here include:

- Create a system of comprehensive outreach for older women with risk factors for homelessness and/or whose housing situations are not secure.

- Complete training with others in the community (police, utility workers, landlords) who have contact with marginally-housed women and may know when they need monitoring or formal intervention.

- Link with church groups and focal-point services, such as senior centers and congregate meal sites, to seek out older women at risk for homelessness.

- Reconnect older women with family and other support systems while attending to problems within these relationships.

Older women are often just "one life crisis away" from losing their housing. Like Mrs. Smith, they do not fit any convenient stereotype or category. To view older homeless women simply as bag ladies is to focus on individual pathology and to discount economic factors that render older women particularly at
risk for homelessness. While the archetypal bag lady does exist, most older homeless women are invisible to service providers. Similarly, factors relating to a lack of social support, and family and/or spousal abuse tend to be largely ignored.

**Study Questions**

1. How does the mind-frame or stereotype of the "bag lady" distort what is known about homelessness among older women?

2. Develop a list of services in your area to support older women at risk of homelessness. Note both existing services and gaps.

**References**


*This study was supported by a grant from the Borchard Foundation Center on Law and Aging, Athens, GA. The full report is available from Dr. Anne Kisor at (804) 828-1159.*